



BARBARA K. CEGAVSKE
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#3607

State of Nevada
Committee for Political Action
(PAC)

Registration Form

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ABOVE SPACE IS FOR OFFICE USE ONLY

☒ New Registration ☒ PAC (Advocating Passage or Defeat of a Ballot Question)

☐ Annual (Due on or before January 15th of each year; NRS 294A.230(4)(b))

☐ Amended Registration: ☐ Change Officers ☐ Change Registered Agent ☐ Change Address
check all that apply

☐ Change Name
Previous Name of PAC

☐ Other:

Name of Committee: HEALTHY, HAPPY VETERANS Telephone: 702.575.0524

Mailing Address: 201 W. LIBERTY ST., SUITE 201 RENO NV 89501
Street Name, Number City State Zip Code

PAC Active Email Address: Kiera.sears@me.com

PURPOSE: Briefly state the purpose for which the PAC was organized.

TO PROVIDE ^{LEGAL} ACCESS FOR VETERANS TO MEDICAL MARIJUANA,
& TO SUPPORT THE ELECTED OFFICIALS WHO ASSIST US,
SPECIFICALLY FOR THE PASSAGE OF INITIATIVE PETITION 2.

REGISTERED AGENT: pursuant to NRS 294A.240, each PAC must appoint and keep in the State a registered agent, as provided in NRS 14.020, who must be a natural person who resides in the State of Nevada.

Name of Registered Agent: KIERA SEARS Telephone: 702-575-0524

Physical Address: 201 W. LIBERTY ST., SUITE 201 RENO NV 89501
Street Name, Number City State Zip Code

REGISTERED AGENT ACCEPTANCE: I hereby accept appointment as Registered Agent for the above-named Committee for Political Action.

☒ Kiera Sears Date: 9/19/16
Signature of Registered Agent



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OFFICERS: List the name, title, address and telephone number of each officer (attach additional pages if necessary).

Officer Name and Title: JOSEPH S. GILBERT, PRESIDENT Telephone: 702.575.0524

Mailing Address: 201 W. LIBERTY ST. SUITE 201 RENO NV 89501
Street Name, Number City State Zip Code

Officer Name and Title: KIERA SEARS, ~~THE~~ SECRETARY, DIRECTOR Telephone: 702.575.0524

Mailing Address: 201 W. LIBERTY ST., SUITE 201 RENO NV 89501
Street Name, Number City State Zip Code

Officer Name and Title: CLINT CATES, ~~THE~~ TREASURER Telephone: 702.575.0524

Mailing Address: 201 W. LIBERTY ST., SUITE 201 RENO NV 89501
Street Name, Number City State Zip Code

Officer Name and Title: _____ Telephone: _____

Mailing Address: _____
Street Name, Number City State Zip Code

AFFILIATIONS: If the PAC is affiliated with any other organizations, list the name, address and telephone number of each organization (please attach additional pages if necessary).

Name of Organization: MAINSTREAM PARTNERS Telephone: 702.575.0524

Mailing Address: 201 W. LIBERTY ST., SUITE 201 RENO NV 89501
Street Name, Number City State Zip Code

Name of Organization: _____ Telephone: _____

Mailing Address: _____
Street Name, Number City State Zip Code

Name of Organization: _____ Telephone: _____

Mailing Address: _____
Street Name, Number City State Zip Code

SUBMITTED BY:

X Kiera Sears Printed Name: KIERA SEARS Date: 9/19/16 Telephone: 702-575-0524
Signature of Representative of Group